
STD

Annual Report



1999

*Department Of Human Services
Oregon Health Division*

HIV/STD/TB Program

Sexually Transmitted Disease (STD) Program

Who We Are: The STD Program exists to prevent and control the spread of sexually transmitted diseases in Oregon. The program's primary control efforts focus on identifying and screening exposed sex partners for evaluation and treatment. Primary prevention is emphasized through education and outreach. The STD Program also collects and evaluates surveillance data to help assure that resources are targeted effectively.

Why We're Here: Sexually transmitted diseases are Oregon's most frequently reported infections, accounting for almost two-thirds of all reportable diseases. Adolescents and young adults (15-24 years) have the highest infection rates. If not identified and managed appropriately, most STDs can cause serious complications. Women and newborns bear an inordinate share of those complications.

What We Do:

- ☒ Reduce complications such as infertility, tubal pregnancy, and chronic pelvic pain by screening adolescent and young adult women for chlamydial infection and treating those who are infected.
- ☒ Decrease the incidence of sexually transmitted disease by interviewing community members with chlamydial, gonococcal, early syphilis, and HIV infections and arranging for their sex partners to be evaluated and treated.
- ☒ Prevent transmission of sexually transmitted disease by providing education and outreach to communities and individuals at greater risk, particularly adolescents.
- ☒ Prevent the incidence of sexually transmitted disease by promoting safer-sex behaviors including abstinence, correct and consistent condom use, and limiting the number of sex partners.
- ☒ Maintain disease intervention services with bilingual and bicultural staff.
- ☒ Focus resources appropriately by collecting and evaluating STD surveillance data.

The Difference We're Making: The STD Program serves county health departments, health care providers, school-based health clinics, hospitals, and other health delivery agencies with a variety of services, including screening and treatment, epidemiologic follow-up, case consultation, and educational presentations.

The program serves more than 50,000 Oregonians annually.

Every dollar spent on sexually transmitted disease prevention saves an estimated two to twelve dollars by decreasing or preventing infertility, tubal pregnancies, chronic pelvic pain associated with pelvic inflammatory disease, congenital morbidity (e.g., congenital syphilis), and conditions related to hepatitis B and HIV.

Whom to Call:

Jan Karius, STD Program Manager, (503) 731-4026

Lila Duncan, Project Coordinator, (503) 731-4026

Gary Fosnaugh, Syphilis Registry, (503) 731-4026

Cara Clark, Chlamydia Registry, (503) 731-4026

Rey Aguillana, STD Disease Intervention Specialist (DIS), (541) 682-3885

Victor Alcantara, HIV/STD/TB Disease Intervention Specialist (DIS), (503) 588-5620

Patrick Gordon, HIV/STD/TB Disease Intervention Specialist (DIS), (503) 588-5620

Andrew Mitsch, HIV/STD/TB Disease Intervention Specialist (DIS), (503) 655-8471 x7542

Kathy Zimmerman, HIV/STD Disease Intervention Specialist (DIS), (503) 681-3714

Introduction:

Sexually transmitted diseases (STDs) are the most frequently reported communicable diseases in Oregon. The list of reportable STDs include chlamydial infections, gonorrhea, syphilis, pelvic inflammatory disease (PID), chancroid and lymphogranuloma venereum.

☒ In 1999, chlamydial infections remained the most commonly reportable STD in Oregon. Nearly 6,200 infections (a case rate of 178 per 100,000 population) were documented, with 2.7 females reported for every male. It is estimated that three-fourths of infected women and up to one-half of infected men have no symptoms to alert them to seek early care. An estimated 20-40% of untreated women with chlamydial infection will develop PID which is associated with infertility, increased risk of tubal pregnancy, and chronic pelvic pain. Only wide spread screening efforts will reach these asymptomatic men and women. It is estimated that every \$1.00 spent now in screening and treatment saves \$12.00 in costs of future complications

☒ For sixteen calendar years, 1980 through 1995, Oregon gonorrhea morbidity decreased compared to the previous year, 11,162 cases in 1980 to 854 cases in 1995. This trend was interrupted with the 886 gonorrhea cases reported in 1996, then continued downward in 1997 with 773 cases, but increased again in 1998, and continued to increase in 1999 with 905 cases reported. The 25 (2.8%) case increase of gonococcal infections in 1999 compared to 1998 is associated with additional cases among white and Hispanic men and Hispanic women. The greatest increase was observed in the 25-29 age group. Gonorrhea infections among gay men also increased in 1999 compared to the previous year. 122 cases in 1999 compared to 82 cases in 1998, a 49% increase. There were no cases of penicillinase producing *Neisseria gonorrhoea* (PPNG) reported during 1999 representing a significant decrease compared to 1998. Currently, significant resistance to gonococcal infections is associated with penicillins and tetracyclines, which are not a recommended treatment for gonococcal infections.

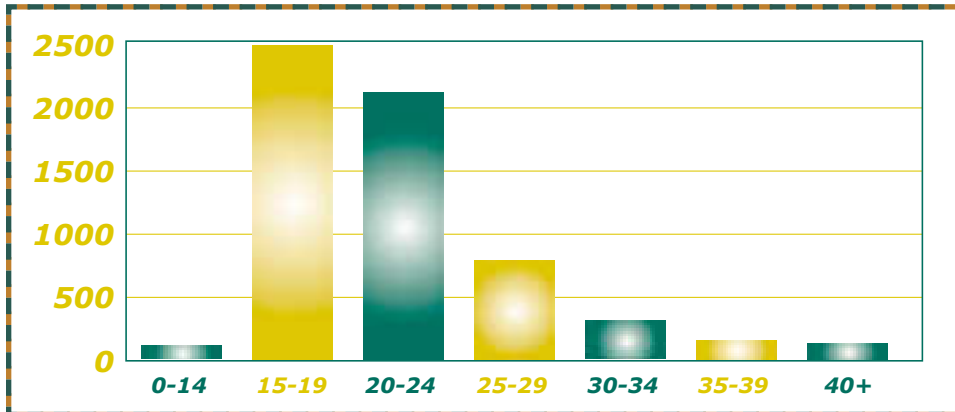
✘ The incidence of early syphilis morbidity (primary, secondary and early latent) is currently low in Oregon. The 14 cases reported in 1999 represents a 1 case (7.1%) increase, and nearly the lowest rate of early syphilis reported during this century. No newborn congenital syphilis infections were reported in 1999.

✘ Recent sex partners of individuals diagnosed with STDs are at risk for infection and should be referred to a health care provider for evaluation. Health department staff generally counsel clients identified with chlamydial, gonococcal, or early syphilis infections regarding the importance of sex partner evaluation, and may assist in partner referral activities. Treatment of sex partners represents an important strategy in preventing spread of STDs.

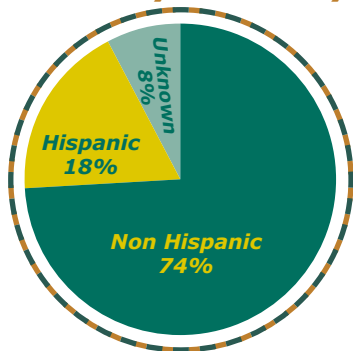
✘ The following data summaries are tabulated from 7,050 cases reported by physicians, clinics, hospitals, other health care providers, and laboratories throughout the state. These reports are used by state, national, and local agencies to help target resources for preventing and controlling STDs.

Oregon Chlamydia 1999

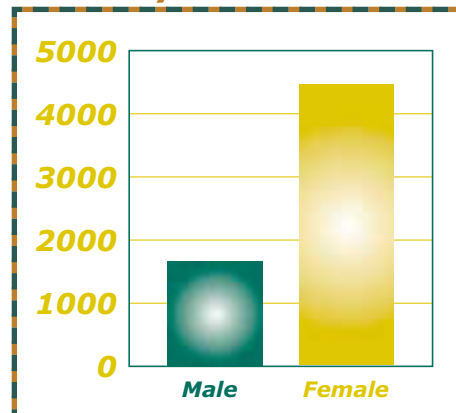
Cases by Age Group



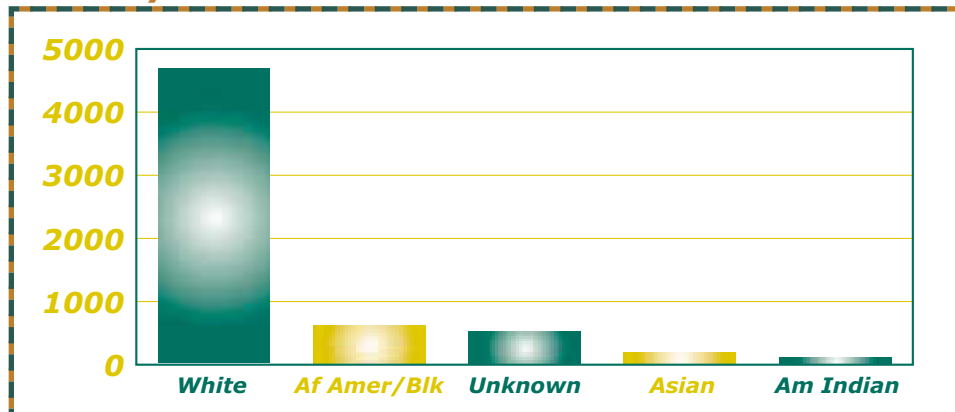
Cases by Ethnicity



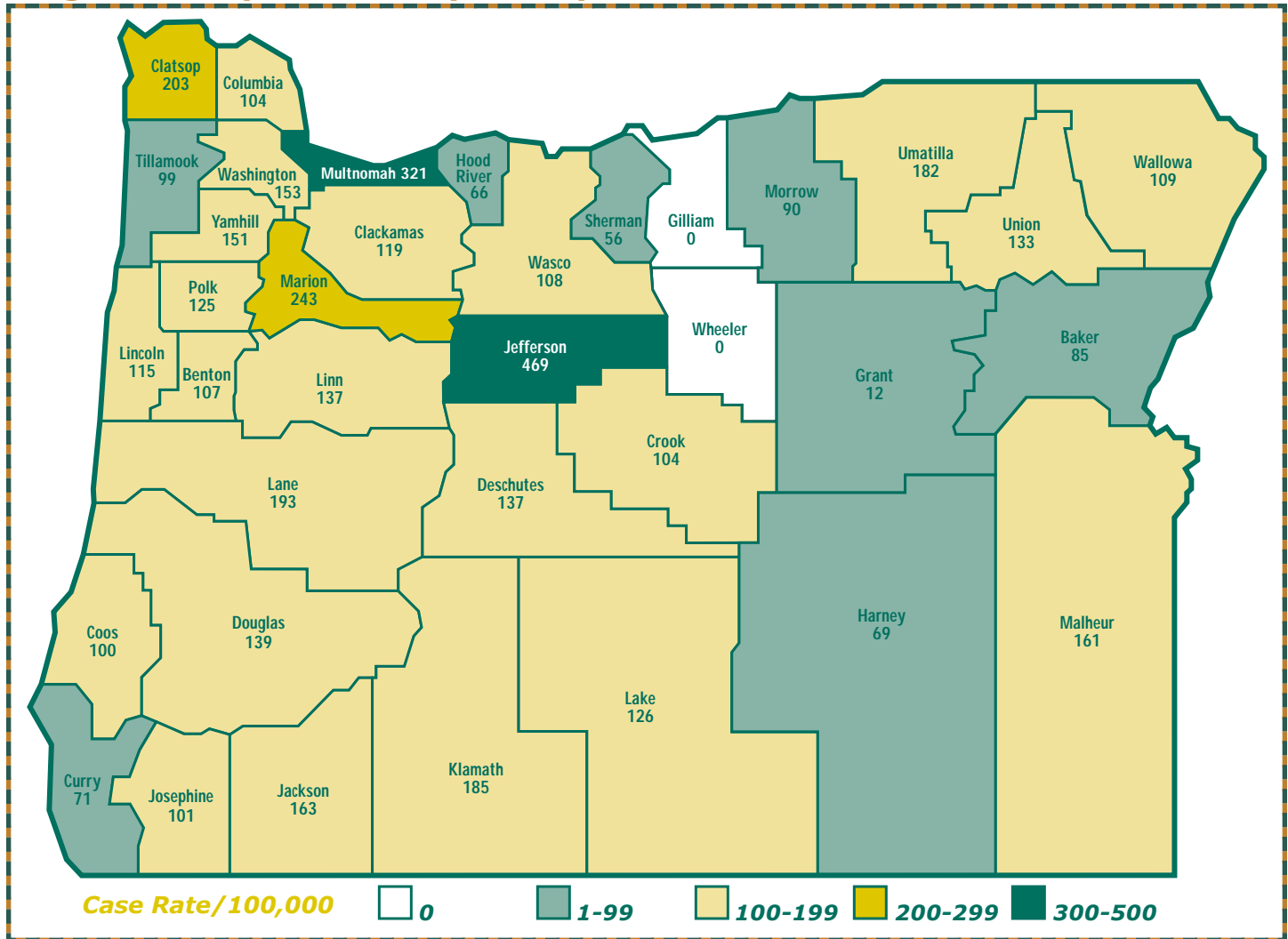
Cases by Sex



Cases by Race



Oregon Chlamydia Rates by County - 1999

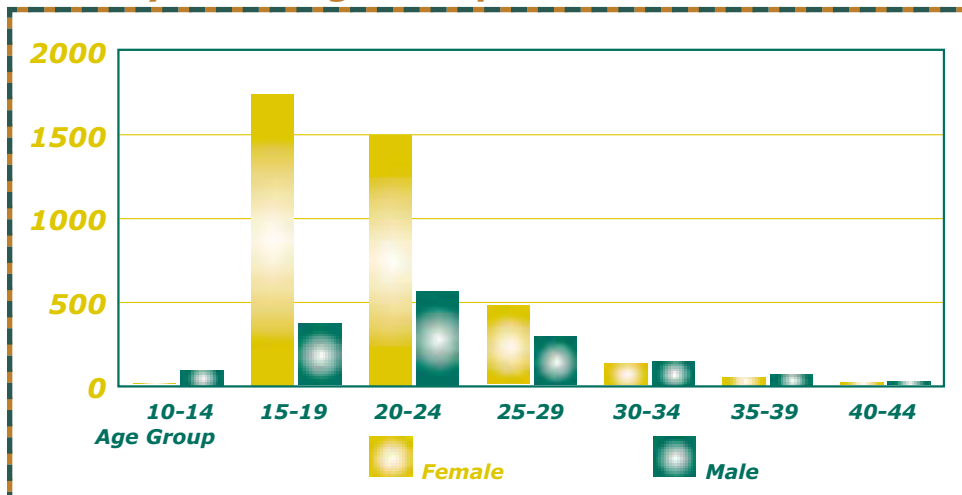


Oregon Chlamydia Morbidity 1999

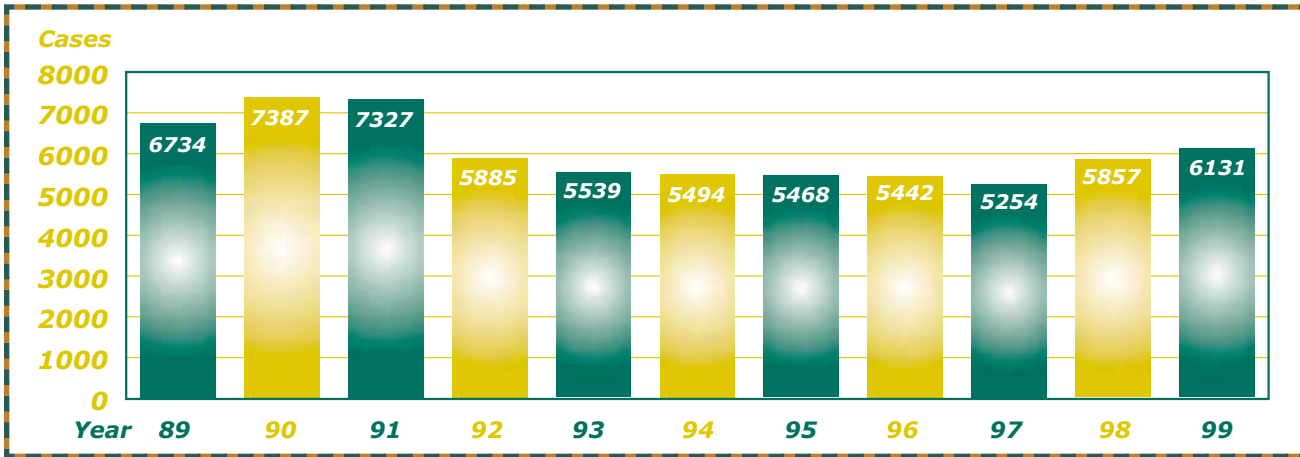
Age	White		Af Amer/Blk		Asian/PI		Am Ind		Hisp		Unknown		Total		Total
	♂	♀	♂	♀	♂	♀	♂	♀	♂	♀	♂	♀	♂	♀	
0-4				1								1		2	2
5-9										1				1	1
10-14	2	66	5	11		1		8		13		12	7	111	118
15-19	227	1318	76	185	15	35	10	30	106	238	34	219	468	2025	2493
20-24	277	964	78	111	26	46	4	27	172	243	43	131	600	1522	2122
25-29	133	279	42	29	10	23	4	8	94	102	21	47	304	488	792
30-34	69	76	23	18	6	10	2	4	35	40	14	18	149	166	315
35-39	26	37	15	6	1	8		2	18	27	6	10	66	90	156
40-44	18	19	6	2	4	1	1	2	12	10		3	40	37	77
45-54	17	13	1	1	2	2			1	5	3		4	21	45
55-65	5		1		1				0				7		7
65+	1							1				1	1	2	3
Sum	775	2772	247	364	65	126	21	82	438	679	121	442	1646	4465	6131
Total	775	2772	247	364	65	126	21	82	438	679	121	442	1646	4465	6131

For the purpose of this table, Hispanic is considered a race.

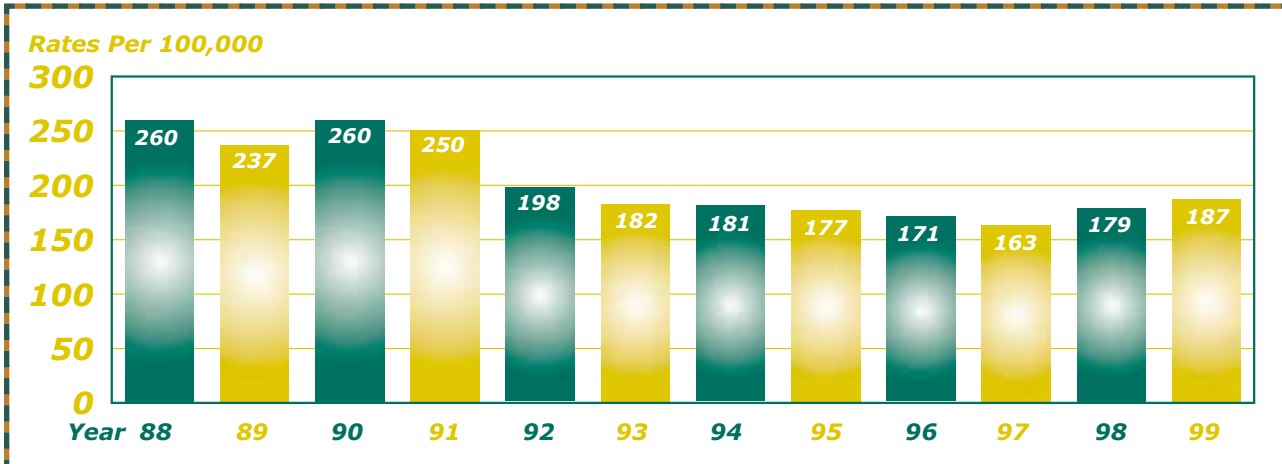
Rates by Sex & Age Group



Oregon Chlamydia Cases, 1989-1999



Oregon Chlamydia Rates Per 100,000 - 1988-1999



Oregon Chlamydia Cases & Rates by County 1997-1999

COUNTY	1997		1998		1999		
	# Cases	Rate/ 100,000	# Cases	Rate/ 100,000	1998 Population Estimates	# Cases	*Rate/ 100,000
Baker	40	242	23	138	16,448	14	85
Benton	102	133	102	133	77,755	83	107
Clackamas	319	100	349	108	334,732	398	119
Clatsop	65	188	72	208	35,424	72	203
Columbia	30	72	43	102	44,416	46	104
Coos	37	60	68	111	62,162	62	100
Crook	13	80	12	72	17,236	18	104
Curry	17	77	27	123	21,157	15	71
Deschutes	59	58	73	70	105,640	145	137
Douglas	113	114	127	127	101,837	142	139
Gilliam	0	0	0	0	2,023	0	0
Grant	3	38	4	50	8,075	1	12
Harney	7	93	2	26	7,198	5	69
Hood River	29	151	19	97	19,553	13	66
Jackson	226	134	296	171	173,123	282	163
Jefferson	56	328	59	339	16,627	78	469
Josephine	46	63	75	103	74,377	75	101
Klamath	98	159	79	127	63,185	117	185

1999 rates calculated on the latest available 1998 population estimates.

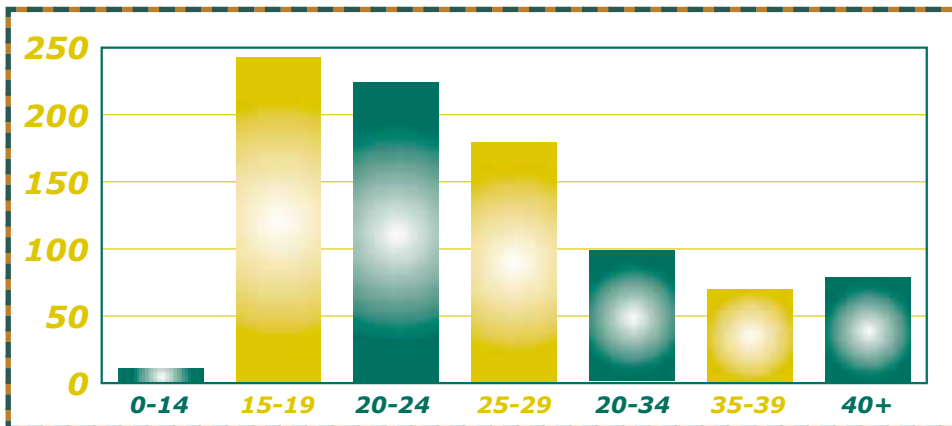
Oregon Chlamydia Cases & Rates by County 1997-1999

COUNTY	1997		1998		1999		
	# Cases	Rate/ 100,000	# Cases	Rate/ 100,000	1998 Population Estimates	# Cases	*Rate/ 100,000
Lake	2	27	4	54	7,152	9	126
Lane	303	98	478	153	314,068	607	193
Lincoln	67	158	56	130	45,368	52	115
Linn	113	112	147	144	104,464	143	137
Malheur	62	216	46	156	28,542	46	161
Marion	671	251	635	234	268,541	653	243
Morrow	24	265	18	192	9,985	9	90
Multnomah	1836	287	2130	332	631,082	2,023	321
Polk	47	82	49	82	61,560	77	125
Sherman	6	316	1	53	1,789	1	56
Tillamook	20	84	22	92	24,356	24	99
Umatilla	140	214	116	173	65,495	119	182
Union	38	155	32	131	24,829	33	133
Wallowa	4	55	2	28	7,368	8	109
Wasco	38	168	27	120	23,059	25	108
Washington	548	142	580	146	399,697	612	153
Wheeler	1	63	1	63	1,566	0	0
Yamhill	74	93	83	101	82,085	124	151
STATE	5,254	163	5,857	179	3,281,974	6,131	187

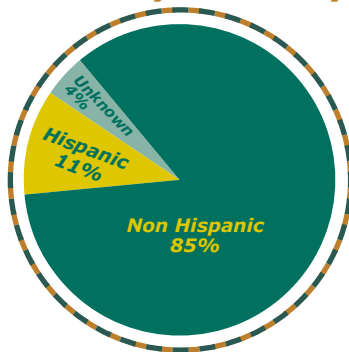
1999 rates calculated on the latest available 1998 population estimates.

Oregon Gonorrhea 1999

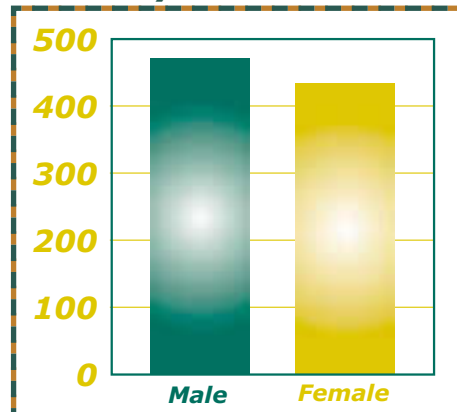
Cases By Age Group



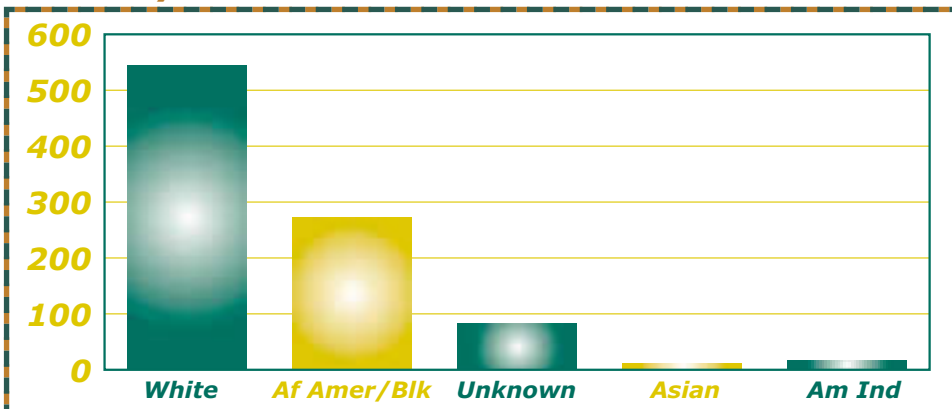
Cases by Ethnicity



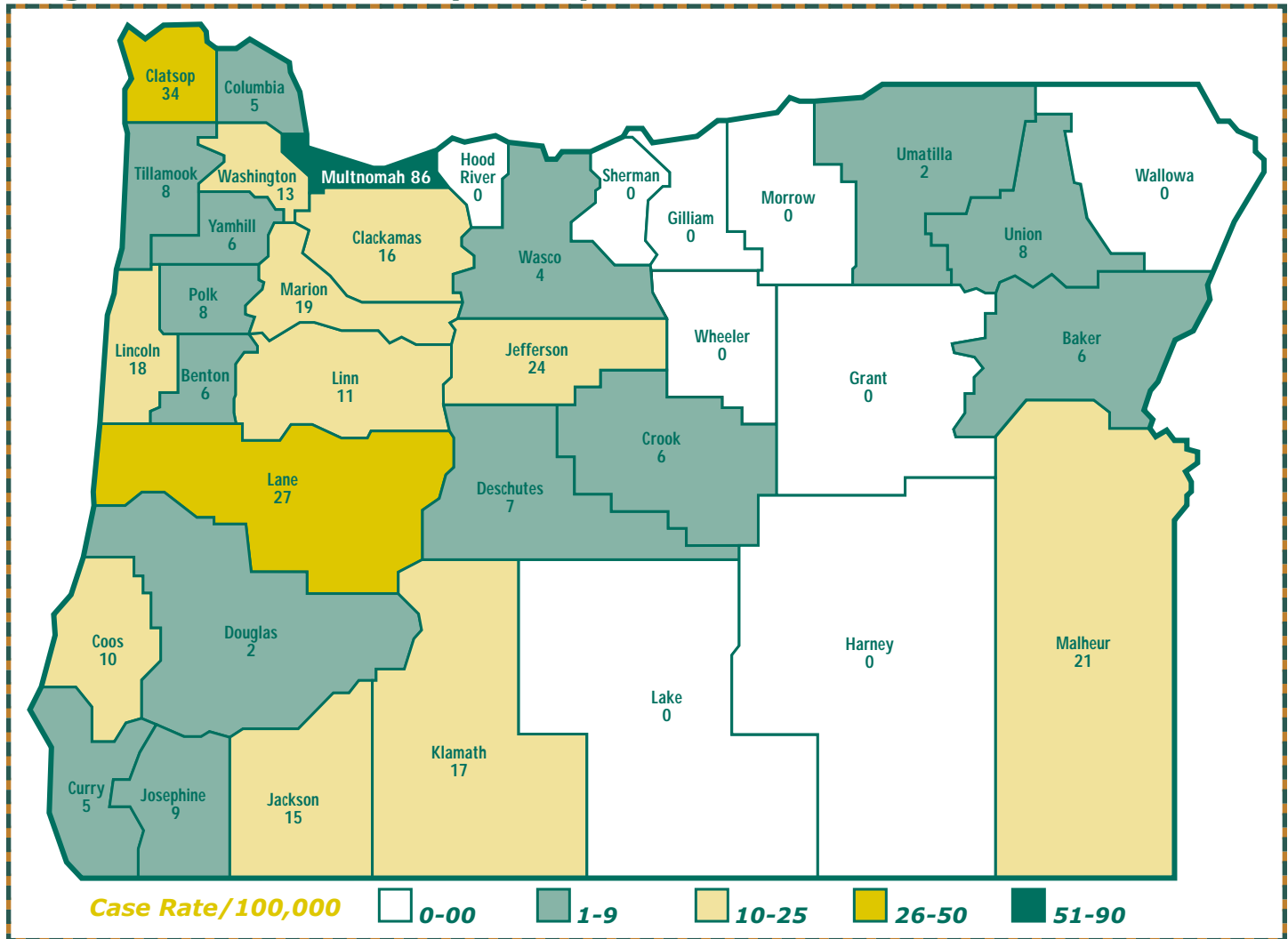
Cases by Sex



Cases By Race



Oregon Gonorrhea Rates by County



Oregon Gonorrhea Cases & Rates by County 1997-1999

COUNTY	1997		1998		1999		
	# Cases	Rate/ 100,000	# Cases	Rate/ 100,000	1998 Population Estimates	# Cases	*Rate/ 100,000
Baker	0	0	1	6	16,448	1	6
Benton	7	9	8	10	77,755	5	6
Clackmas	37	12	31	10	334,732	52	16
Clatsop	4	12	2	6	35,424	12	34
Columbia	6	15	2	5	44,416	2	5
Coos	1	2	3	5	62,162	6	10
Crook	2	12	2	12	17,236	1	6
Curry	1	5	0	0	21,157	1	5
Deschutes	6	6	7	7	105,640	7	7
Douglas	3	3	2	2	101,837	2	2
Gilliam	0	0	0	0	2,023	0	0
Grant	0	0	0	0	8,075	0	0
Harney	0	0	0	0	7,198	0	0
Hood River	0	0	0	0	19,553	0	0
Jackson	10	6	31	18	173,123	26	15
Jefferson	2	12	2	12	16,627	4	24
Josephine	2	3	6	8	74,377	7	9
Klamath	3	5	1	2	63,185	11	17

1999 rates calculated on the latest available 1998 population estimates.

Oregon Gonorrhea Cases & Rates by County 1997-1999

COUNTY	1997		1998		1999		
	# Cases	Rate/ 100,000	# Cases	Rate/ 100,000	1998 Population Estimates	# Cases	*Rate/ 100,000
Lake	0	0	0	0	7,152	0	0
Lane	73	24	112	36	314,068	86	27
Lincoln	5	12	5	12	45,368	8	18
Linn	12	12	10	10	104,464	11	11
Malheur	3	11	8	27	28,542	6	21
Marion	46	17	58	21	268,541	51	19
Morrow	2	22	0	0	9,985	0	0
Multnomah	478	75	528	82	631,082	540	86
Polk	4	7	3	5	61,560	5	8
Sherman	1	53	0	0	1,789	0	0
Tillamook	1	4	0	0	24,356	2	8
Umatilla	2	3	0	0	65,495	1	2
Union	0	0	0	0	24,829	2	8
Wallowa	0	0	0	0	7,368	0	0
Wasco	1	4	0	0	23,059	1	4
Washington	55	14	54	14	399,697	50	13
Wheeler	0	0	0	0	1,566	0	0
Yamhill	6	8	4	5	82,085	5	6
STATE	773	24	880	30	3,281,974	905	28

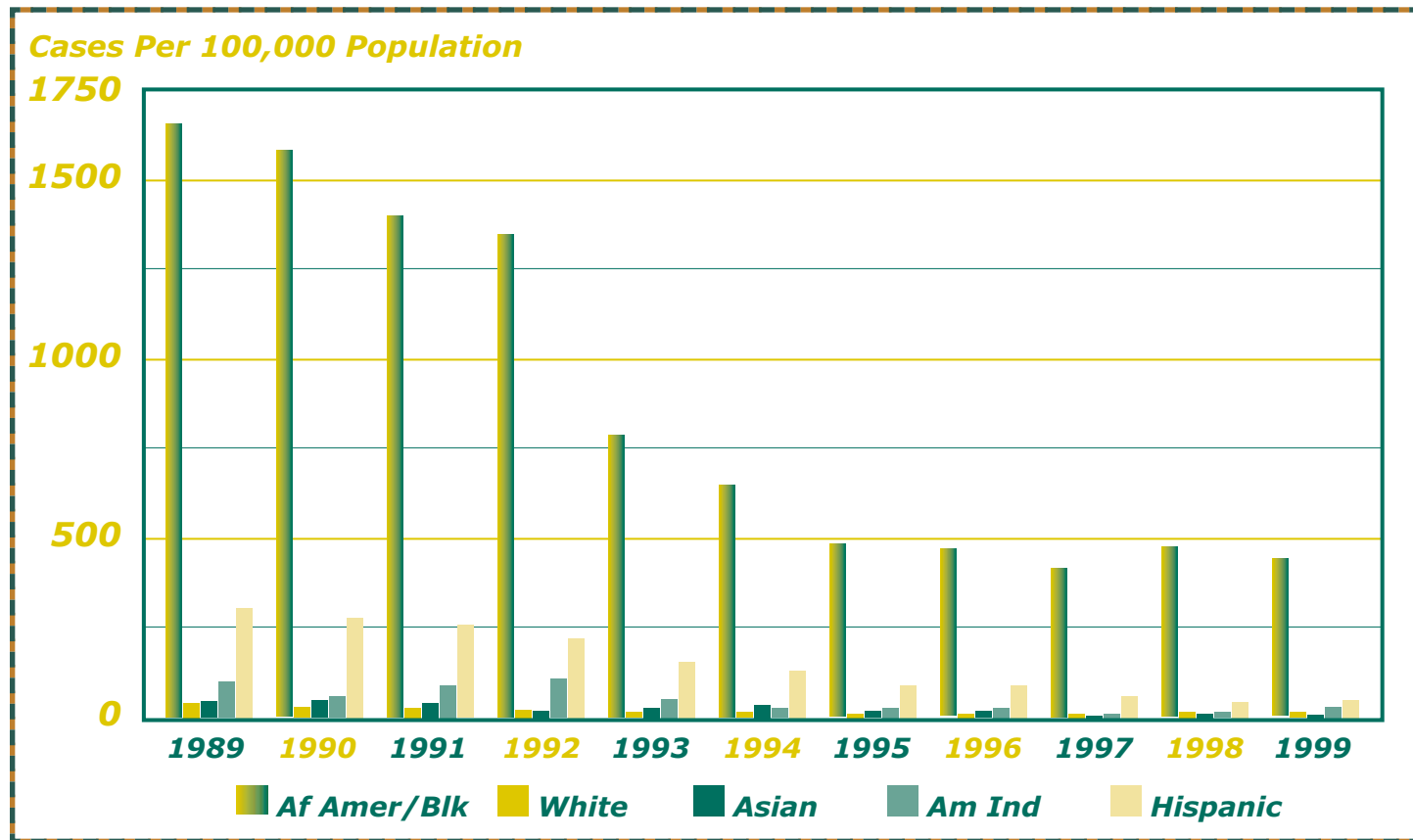
1999 rates calculated on the latest available 1998 population estimates.

Oregon Gonorrhea Morbidity 1999

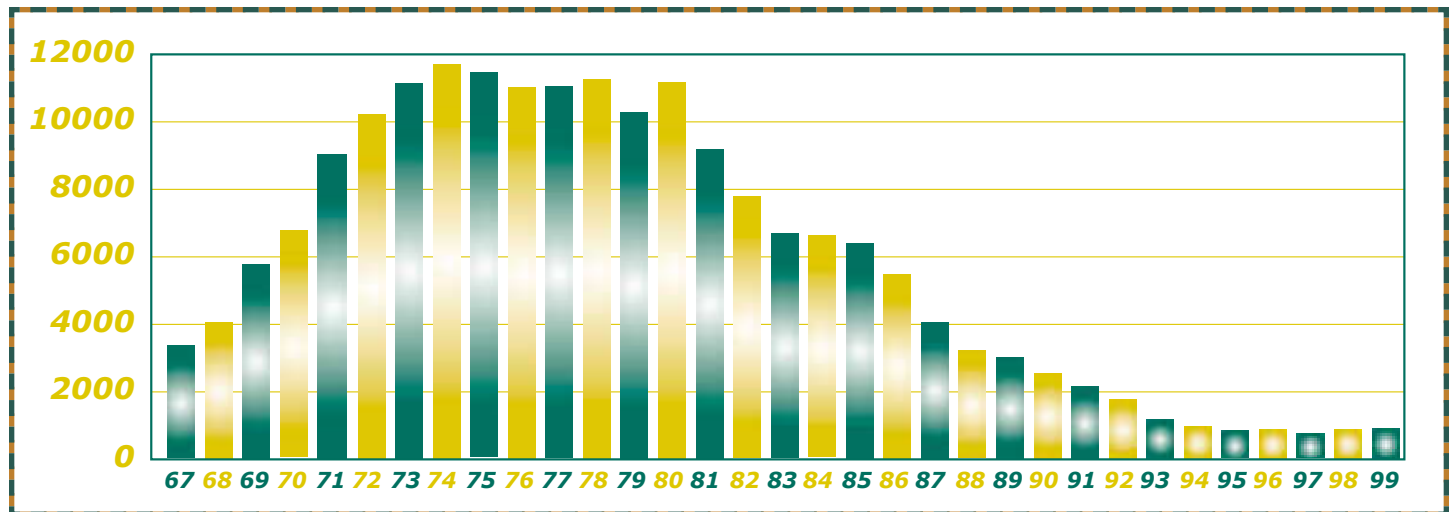
Age	White		Af Amer/Blk		Asian/PI		Am Ind		Hisp		Unknown		Total		Total
	♂	♀	♂	♀	♂	♀	♂	♀	♂	♀	♂	♀	♂	♀	
0-4															
5-9															
10-14		6		4					1				1	10	11
15-19	13	87	31	59	1	2	2	4	13	11	6	13	66	176	242
20-24	40	71	34	39	1	1		2	14	8	10	4	99	125	224
25-29	59	38	31	16	1			3	16	6	7	2	114	65	179
30-34	40	16	19	3	1	2	2		7	4	3	2	72	27	99
35-39	33	8	12	4					6		5	1	57	13	70
40-44	13	2	7	2			1		7	3	3	1	29	8	37
45-54	13	3	8	1	1				2		1	4	25	8	33
55-65	4	1	1						1		1		7	1	9
65+	1												1		1
Sum	216	232	143	128	5	5	5	9	67	32	36	27	471	433	905
Total	216	232	143	128	5	5	5	9	67	32	36	27	471	433	905

For the purpose of this table, Hispanic is considered a race.

Oregon Gonorrhea Case Rates by Race 1989-1999

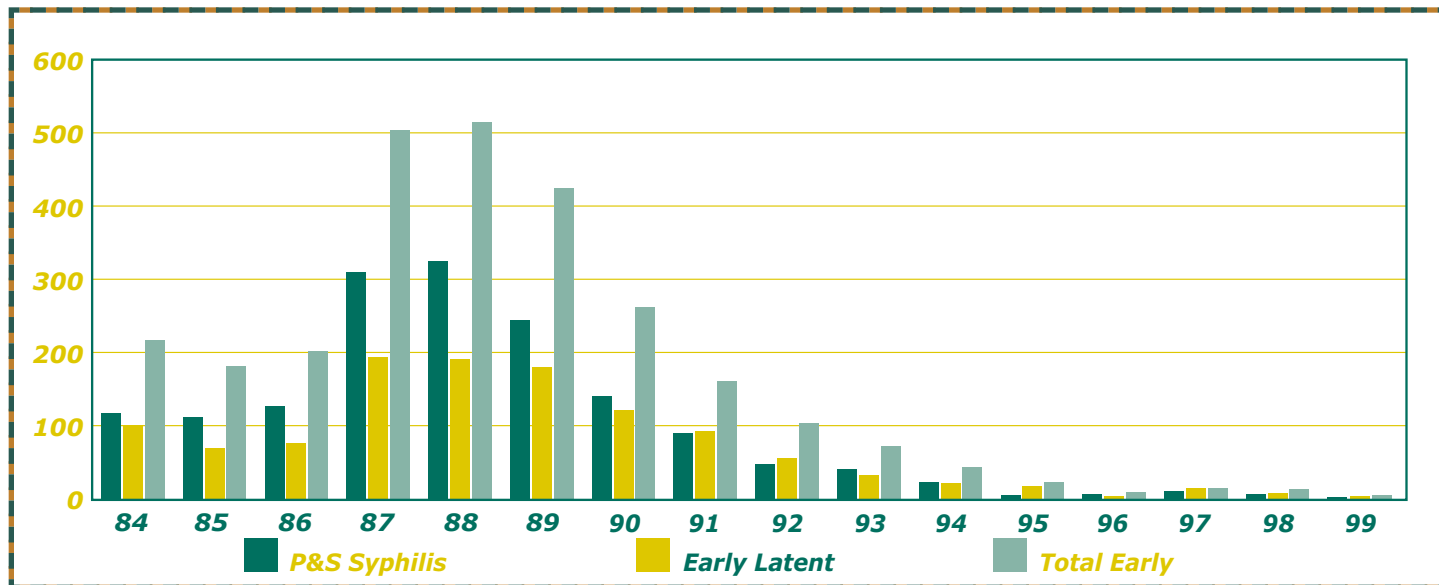


Oregon Gonorrhea Cases By Year - 1967-1999

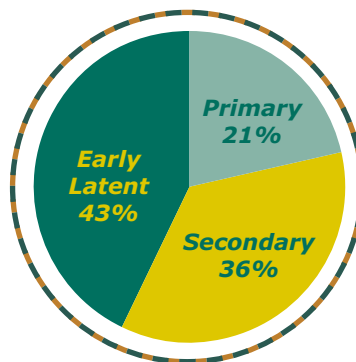


Oregon Syphilis 1999

Oregon Early Syphilis Cases - 1984-1999



Oregon Early Syphilis 1999



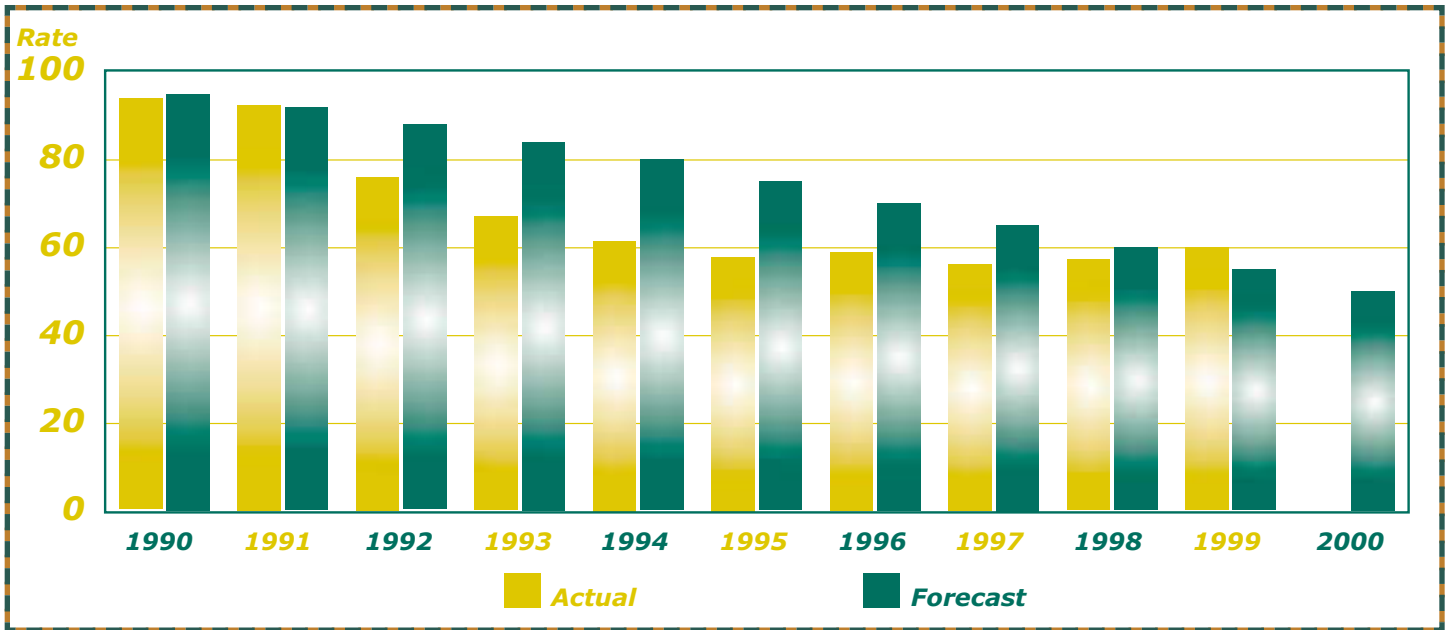
Status of STD Benchmarks

Student and adult sexually transmitted disease (STD) Benchmarks are part of the Benchmarks for People section of the Oregon Benchmarks Document. Meeting the STD Benchmarks will enhance quality of life by reducing complications associated with STD's, for example, infertility and tubal pregnancy related to chlamydial and gonococcal infections. These infections are among the most common seen in all types of primary care settings. Reducing the incidence of STD's would enhance general and reproductive health of women and men, and would improve the health status of new-borns. In addition, reduction in STD's, especially those associated with genital ulcers, e.g., genital herpes and syphilis, will also reduce the transmission of HIV.

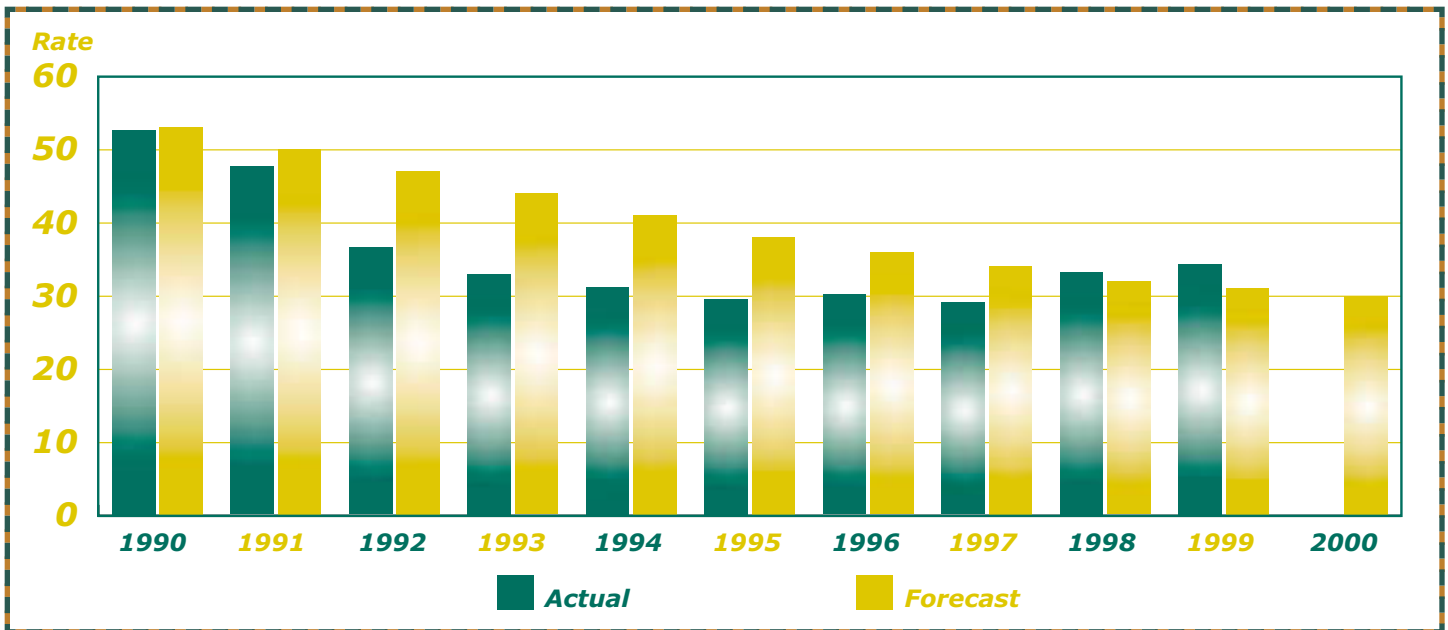
Explanation: the student (10-19 age group) and adult (20-44) STD Benchmarks are an aggregate of reported chlamydial, gonococcal, and early syphilis infections expressed as a rate per 10,000 population. Case data shown for the year 2000 are forecasted cases to meet the benchmark. Benchmarks are underlined. The 15-19 student sub-group is included to demonstrate that this group accounts for the majority of the cases in the 10-19 group. Current data indicate that Oregon may not achieve STD Benchmarks for the year 2000. The slight increase of cases and rates for 1998 and 1999 compared to 1997 reflect additional chlamydial infections identified by screening a greater number of adolescents and young adults and the increased use of tests with greater sensitivity, and a modest increase observed for gonococcal infections. Please refer to the following table.

	Student 10-19	Subgroup 15-19	Adult 20-44
Year	Cases/Rate	Cases/Rate	Cases/Rate
1990	3,675/ 94.1	3,467/ 181.7	5,938/ 52.6
1991	3,738/ 92.4	3,527/ 184.3	5,325/ 47.7
1992	3,121/ 76.6	2,904/ 148.3	4,235/ 36.7
1993	2,835/ 67.2	2,667/ 131.2	3,836/ 33.0
1994	2,593/ 61.4	2,372/ 116.6	3,633/ 31.2
1995	2,491/ 57.7	2,315/ 110.8	3,450/ 29.6
1996	2,615/ 59.0	2,449/ 112.9	3,561/ 30.2
1997	2,543/ 56.1	2,372/ 103.6	3,392/ 29.1
1998	2,710/ 57.4	2,547/ 106.8	3,950/ 33.3
1999	2,872/ 60.0	2,741/ 112.8	4,038/ 34.4
2000	2,279/ <u>50.0</u>		3,631/ <u>30.0</u>

1990-2000 Forecast & 1990-1999 Actual ~ 10-19 Age Group



1990-2000 Forecast & 1990-1999 Actual ~ 20-24 Age Group



Oregon PID* Cases 1988 - 1999

GPID*, CPID*, Non-GPID/CPID* & Total PID

YEAR	GPID	CPID	Non-G,C/PID	Total PID
1988	112	144	645	901
1989	101	152	543	796
1990	71	217	889	1177
1991	85	133	1367	1585
1992	71	148	1463	1682
1993	38	172	1373	1583
1994	43	74	1123	1240
1995	60	161	765	986
1996	63	230	583	876
1997	37	232	450	719
1998	46	211	448	705
1999	42	167	243	452

* Pelvic Inflammatory Disease

* Gonococcal PID

* Chlamydial PID

* Non-Gonococcal, Non-Chlamydial PID